

11/16/01
11132 U.S. PTO

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Atty. Dkt. No. 086142-0494

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hikaru KAMEYOSHI et al.
Title: SEAT BELT RETRACTOR
Appl. No.: Unassigned
Filing Date: Herewith
Examiner: Unassigned
Art Unit: Unassigned

JC903 U.S. PTO
09/98048
11/16/01

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (18 pages).
- ☒ Informal drawings (6 sheets, Figures 1-9).
- ☒ Executed Declaration and Power of Attorney (4 pages).
- ☒ Assignment of the invention to TAKATA CORPORATION.
- ☒ Assignment Recordation Cover Sheet.
- ☒ Check in the amount of \$40.00 for Assignment recordation.
- ☐ Small Entity Statement.
- ☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).

- ☒ Information Disclosure Statement.
- ☒ Form PTO-1449 with copies of 15 listed reference(s).
- ☐ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$740.00		\$740.00
Total Claims:	11	-	20	=	0	x	\$18.00	=	\$0.00
Independents:	3	-	3	=	0	x	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present:						+	\$280.00	=	\$0.00
							SUBTOTAL:	=	\$740.00
<input type="checkbox"/>							Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$740.00

- ☒ A check in the amount of \$740.00 to cover the filing fee is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 11/16/2001

By 

FOLEY & LARDNER
Washington Harbour
3000 K Street, N.W., Suite 500
Washington, D.C. 20007-5109
Telephone: (202) 672-5300
Facsimile: (202) 672-5399

Michael D. Kaminski
Registration No. 32,904
Howard N. Shipley
Registration NO. 39,370